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OCT - 9 2009

EXAMINER

TO:	Registration Secti Division of Corpo		•		•
	Alex				
SUBJI	ECT:		per's Park LLC		
		Name of Limit	ted Liability Company		
The en	closed Articles of An	nendment and fee(s) are sub	mitted for filing.		
Please	return all correspond	ence concerning this matter	to the following:		
Hicham Al-Bochi					
			Name of Person		
		Li	ghtkeeper's Park LLC	>	
			Firm/Company		
		5	004 64th Drive West		
			Address		
		Bra	adenton, Florida 3421	0	
			City/State and Zip Code		
		mma E-mail address: (t	azie@tampabay.rr.cc o be used for future annual rep	ort notification)	
For fu	ther information con	cerning this matter, please c	all:		
	Merino	da A. Mazie	at (_941)	727-3224	
Name of Person		Area Code &	Daytime Telephone Nur	nber	
Enclos	ed is a check for the	following amount:			
	5.00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e	Certi enclosed) Certi	Filing Fee, ficate of Status & ified Copy itional copy is enclosed)
MAILING ADDRESS:		STREET/0	COURIER ADDRESS	S:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2009 OCT -8 PM 2: 14

			7003 00.	* A T C
	Lightkeeper	s Park LLC	SECRET	ARY OF STATE
(<u>Nai</u>	ne of the Limited Liability Compa	ny as it now appears	on our rechres.	COEFT COM
	Lightkeeper' ne of the Limited Liability Compa (A Florida Limited I	chaomity Company)		
	or this Limited Liability Company		2/14/05	and assigned
Florida document number	L05000015293			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liab	oility company here:		
		·.		
The new name must be distingui "L.L.C."	shable and end with the words "Lim	ited Liability Company	," the designation "I	LLC" or the abbreviation
Enter new principal offices a	ddress, if applicable:			
(Principal office address MUS	ST BE A STREET ADDRESS)			
			/	
Enter new mailing address, i	f applicable:			
(Mailing address MAY BE A	POST OFFICE BOX)			
			1	
	ered agent and/or registered of		r records, <u>enter t</u>	the name of the nev
registered agent and/or the n	new registered office address her	<u>·e</u> :		
Name of Name Desire				
Name of New Regist	ered Agent:			
New Registered Office Address:				1
		/ Ente	r Florida street ada	iress
			, Florida	
		City		Zip Code
New Registered Agent's Signat	ture, if changing Registered Agent	i		
the sales are and the same test		424 : 47::		
	nent as registered agent and ag relative to the proper and comp			
accept the obligations of my	position as registered agent as	provided for in Cha	pter 608, F.S. Or,	if this document is
being filed to merely reflect	a change in the registered office	e address, I hereby o	confir <mark>m that the li</mark> i	nited liability

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Merinda A. Mazie	5004 64th Drive West Bradenton, Florida 3421	O Add Remove
<u>MGR</u>	Rayan Al-Bochi Mazie	5004 64th Drive West Bradenton, Florida 3421	✓ Add O Remove
			Add Remove
			Add Remove
			☐ Add ☐ Remove
			Add Remove
D. If amer	nding any other information, e	nter change(s) here: (Attach additional shee	ets, if necessary.)
-			
Dated	October 5	_,	7009 TAL
	Signature	of a member or authorized représentative of a me	TALLAHASS
		SEX P	
		Typed or printed name of signee Page 2 of 2	FROM RESTALL
		Filing Fee: \$25.00	DF +